

<b>UTILITY</b> <b>PATENT APPLICATION</b> <b>TRANSMITTAL</b> <small>(Only for nonprovisional applications under 37 CFR 1.53(b))</small>	Attorney Docket No.	2000-0027-CIP1	Total Pages	52
	First Named Inventor Application Identifier			Ellen Isaacs et al
	Express Mail Label No.	EL246515095US		

<b>APPLICATION ELEMENTS</b> <small>See MPEP chapter 600 concerning utility patent application contents.</small>		ADDRESS TO:	Commissioner for Patents Box Patent Application Washington, D.C. 20231	
1. <input checked="" type="checkbox"/> Fee Transmittal Form <small>(submit an original, and a duplicate for fee processing)</small> 2. <input checked="" type="checkbox"/> Specification [Total Pages 34] <small>(preferred arrangement set forth below)</small> <ul style="list-style-type: none"> <li>- Descriptive title of invention</li> <li>- Cross References to Related Applications</li> <li>- Statement Regarding Fed sponsored R&amp;D</li> <li>- Reference to Microfiche Appendix</li> <li>- Background of the Invention</li> <li>- Brief Summary of the Invention</li> <li>- Brief Description of the Drawings(if filed)</li> <li>- Detailed Description</li> <li>- Claim(s)</li> <li>- Abstract of the Disclosure</li> </ul> 3. <input checked="" type="checkbox"/> Drawing(s)(35 USC 113) [Total Sheets 11] 4. Oath or Declaration [Total Pages 4] <ul style="list-style-type: none"> <li>a. <input checked="" type="checkbox"/> Newly executed (unsigned)</li> <li>b. <input type="checkbox"/> Copy from a prior application(37 CFR 1.63(d))  <small>(for continuation/divisional with Box 15 completed)</small>  <small>[Note Box 15 below]</small></li> <li>i. <input type="checkbox"/> <b>DELETION OF INVENTOR(S)</b>  <small>Signed statement attached deleting inventor(s) named in the prior application, see 37 CFR 163(d)(2) and 1.33(b)</small></li> </ul>		5. <input type="checkbox"/> Microfiche Computer Program (Appendix) 6. <input type="checkbox"/> Nucleotide and/or Amino Acid Sequence Submission <small>(if applicable, all necessary)</small> <ul style="list-style-type: none"> <li>a. <input type="checkbox"/> Computer Readable Copy</li> <li>b. <input type="checkbox"/> Paper Copy(identical to computer copy)</li> <li>c. <input type="checkbox"/> Statement verifying identity of above copies</li> </ul>		
<b>ACCOMPANYING APPLICATION PARTS</b>				
7. <input type="checkbox"/> Assignment Papers(cover sheet & document(s)) 8. <input type="checkbox"/> 37 CFR 3.73(b)Statement <input type="checkbox"/> Power of Attorney 9. <input type="checkbox"/> English Translation Document (if applicable) 10. <input type="checkbox"/> Information Disclosure <input type="checkbox"/> Copies of IDS Statement(IDS)/PTO-1449 Citations 11. <input type="checkbox"/> Preliminary Amendment 12. <input checked="" type="checkbox"/> Return Receipt Postcard (MPEP 503) <small>(Should be specifically itemized)</small> 13. <input type="checkbox"/> Certified Copy of Priority Document(s) <small>(if foreign priority is claimed)</small> 14. <input type="checkbox"/> Other :				

15. If a CONTINUING APPLICATION, check appropriate box and supply the requisite information below and in a preliminary amendment:

Continuation  Divisional  Continuation-in-part (CIP) of prior Application No: 09/609,893

Prior application information: Examiner:

Group/Art Unit:

For CONTINUATION or DIVISIONAL APPS only: The entire disclosure of the prior application, from which an oath or declaration is supplied under Box 4b, is considered a part of the disclosure of the accompanying continuation or divisional application and is hereby incorporated by reference. The incorporation can only be relied upon when a portion has been inadvertently omitted from the submitted application parts.

#### 16. CORRESPONDENCE ADDRESS

<input type="checkbox"/> Customer Number or Bar Code Label	(Insert Customer No. or Attach bar code label here)		<input type="checkbox"/> Correspondence address below
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NAME	Samuel H. Dworetzky			
ADDRESS	AT&T CORP. P.O. Box 4110			
CITY	Middletown	STATE	New Jersey	ZIP CODE
COUNTRY	United States of America			

#### 17. SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT REQUIRED

NAME	Cedric G DeLaCruz		Reg. #	36498
TELEPHONE	908-221-5430			
SIGNATURE			DATE	4-12-01

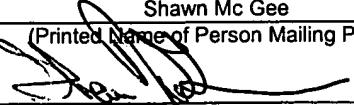
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Date of Deposit

I hereby certify that this continuation-in-part application is being deposited with the United States Postal Service "Express Mail Post Office to Addressee" service under 37 CFR 1.10 on the date indicated above and is addressed to the Assistant Commissioner for Patents, Washington D.C., 20231

Shawn Mc Gee

(Printed Name of Person Mailing Paper)

  
(Signature of Person Mailing Paper)

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<p>1. The Commissioner is hereby authorized to charge indicated fees and credit any overpayments to:</p> <p>Deposit Account Number 01-2745 Deposit Account Name AT&amp;T CORP.</p> <p><input checked="" type="checkbox"/> Charge Any Additional Fee Required Under 37 CFR 1.16 and 1.17    <input type="checkbox"/> Charge the Issue Fee Set in 37 CFR 1.18 at the Mailing Date of the Notice of Allowance</p>				<p><b>3. 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104	270	Multiple Dependent Claims																																																																																																																																																																																																														
109	80	Reissue independent claims over original patent																																																																																																																																																																																																														
110	18	Reissue claims in excess of 20 and over original patent																																																																																																																																																																																																														
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<p>* Reduced by Basic Filing Fee Paid</p>			SUBTOTAL(3) 0																																																																																																																																																																																																													

SUBMITTED BY		Complete (if applicable)		
Typed or Printed Name	Cedric G DeLaCruz			Reg. Number
Signature	Cedric G DeLaCruz	Date	4-12-01	Deposit Account User ID